

SENDER: COMPLETE THIS SECTION**COMPLETE THIS SECTION ON DELIVERY**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the envelope.



United Parcel Service
c/o The Corporation
2000 Interstate Park Dr. Ste 204
Montgomery, AL 36109

A. Signature <i>X L. Danneel</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
B. Received by (Printed Name)	C. Date of Delivery <i>2-8-07</i>

address different from item 1? Yes
Delivery address below: No

06CV538
Lias Sunn-CMP

3. Service Type
<input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered <input checked="" type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.
4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes

2. Article Number
(Transfer from service) **7005 0390 0003 0506 8068**

Domestic Return Receipt

102595-02-M-1540

PS Form 3811, February 2004